



CERTIFICATION DOCUMENT CHECKLIST

Please include all support documents with your application

Failure to do so delays the certification review process

Please include this checklist for easier processing

Firm Name: _____		SBD Use Only
<input type="checkbox"/>	1. CSBE Personal Net Worth (Construction Firms Only) (See Section #11 of Application) <input type="checkbox"/> N/A	<input type="checkbox"/> Submitted
<input type="checkbox"/>	2. Copies of signed corporate federal tax returns), including all schedules for the last three (3) years or number of years a firm and/or affiliates have been in business. For sole proprietor, copies of individual tax returns for the last 3 years or number of years firm and/or affiliates have been in business, or a copy of Form 7004 (If Wholesaler/Manufacturer see #12)	<input type="checkbox"/> Submitted <input type="checkbox"/> Submitted - Affiliates
<input type="checkbox"/>	3. Proof of Ownership – Corporation/ LLC/Partnership/ Sole Proprietorship	<input type="checkbox"/> Submitted (Sunbiz Report)
<input type="checkbox"/>	4. Qualifier is an owner: CBE – 25% CSBE – 10% Micro/SBE – 10%	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	5. Picture ID for each owner (driver's license)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	6. Resume(s) for all Corporate Officers/Key Personnel (See Section #12 of Application)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	7. Copies of all current Miami-Dade County and municipality (e.g. City of Hialeah, City of Miami) Local Business Tax Receipt, individual, and firm if the firm is a professional association (e.g. accountant, architect, engineer)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	8. Copies of current State and local Certificate of Competency (front and back) from Miami-Dade County, contractor's professional license.	<input type="checkbox"/> Submitted
<input type="checkbox"/>	9. Firm name and address match Local Business Tax Receipt	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	10. Copy of current Technical Certification (Professional categories, land surveyors, mapping, geologist, etc.-CBE certifications ONLY)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	11. CBE/CSBE: Office located in Miami-Dade County (Current lease/sub-lease agreement, purchase or settlement agreement (for primary residence) or copies of warranty deed (home based businesses) Micro/SBE: Office located Miami-Dade County (current lease/sub-lease agreement, purchase or settlement agreement (for primary residence) or copies of warranty deed (home based businesses)	<input type="checkbox"/> Y <input type="checkbox"/> N If No, Where is Office Located? _____
<input type="checkbox"/>	12. Current Lease Agreement, Purchase agreement, or Copy of Warranty Deed to show ownership of property	<input type="checkbox"/> Submitted
<input type="checkbox"/>	13. Commodity codes for each trade category specific to license and/or technical certification	<input type="checkbox"/> Y <input type="checkbox"/> N
<input type="checkbox"/>	14. Copy of manufacturers or wholesalers most recent Florida Department of Revenue Employer's Quarterly Report-Form UCT-6 (Goods & Services Only)	<input type="checkbox"/> Submitted
<input type="checkbox"/>	15. All affiliate documents (See Section #13 of Application) Name of Affiliates: _____ _____ _____ <input type="checkbox"/> N/A	<input type="checkbox"/> Submitted (Sunbiz report for all entities in file)
	Comments:	